

Sheet 1 of 2

THIS FORM REPLACES DR FORM 40, JAN 02
PREVIOUS EDITIONS WILL BE DESTROYED

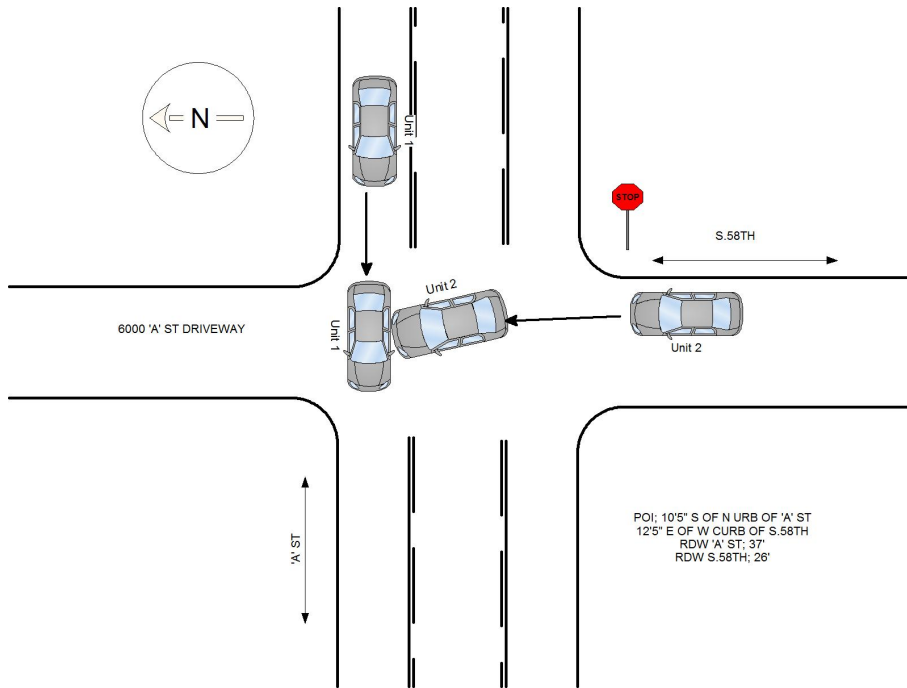
THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-086202



Indicate
North
by Arrow



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver of veh#1 was W bound on 'A'st approaching S.58th st in the N curb lane at 35 mph. Driver of veh #2 was stopped at stop sign on SE corner of S.58th/ 'A'st facing N bound to cross 'A'st & enter into driveway of Pius High at 6000 'A'st. Driver of veh#2 started to cross traffic lanes & didn't see veh#1 coming W bound on 'A'st due to traffic & sun glare & hit veh #1.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME				PHONE
	NAME				PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS			
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME										
1				X	'A' ST				4		2				
2	X				S.58TH										
1	01	06 Turning left 07 Making U-turn 08 Entering traffic lane 09 Leaving traffic lane 10 Parked 11 Slowing or stopped in traffic 12 Other 13 Unknown				VEHICLE 1		VEHICLE 2		1 Deployed - front 2 Deployed - side 3 Deployed - both front/side 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown		1 None used - vehicle occupant 2 Lap & shoulder belt used 3 Shoulder belt only used 4 Lap belt only used 5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown		ALCOHOL/ DRUGS SUSPECTED 1 Neither alcohol nor drugs suspected 2 Yes - alcohol suspected 3 Yes - drugs suspected 4 Yes - alcohol & drugs suspected 5 Unknown	
2	01					POINT OF IMPACT	07	POINT OF IMPACT	02					MOST DAMAGED AREA	07
						00 None 09 Top & windows 10 Undercarriage 11 Total (all areas) 12 Other		01 02 03 04 08 07 06		VEHICLE 2					

OFFICER NO. 716	TROOP/ TEAM/ BEAT NE	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) David Domeier		INVESTIGATOR SIGNATURE Approved by Officer David Domeier	DATE OF REPORT 09/17/2015